



Public Health Preparedness and Emergency Response

Presentation to the House Committee on Public Health

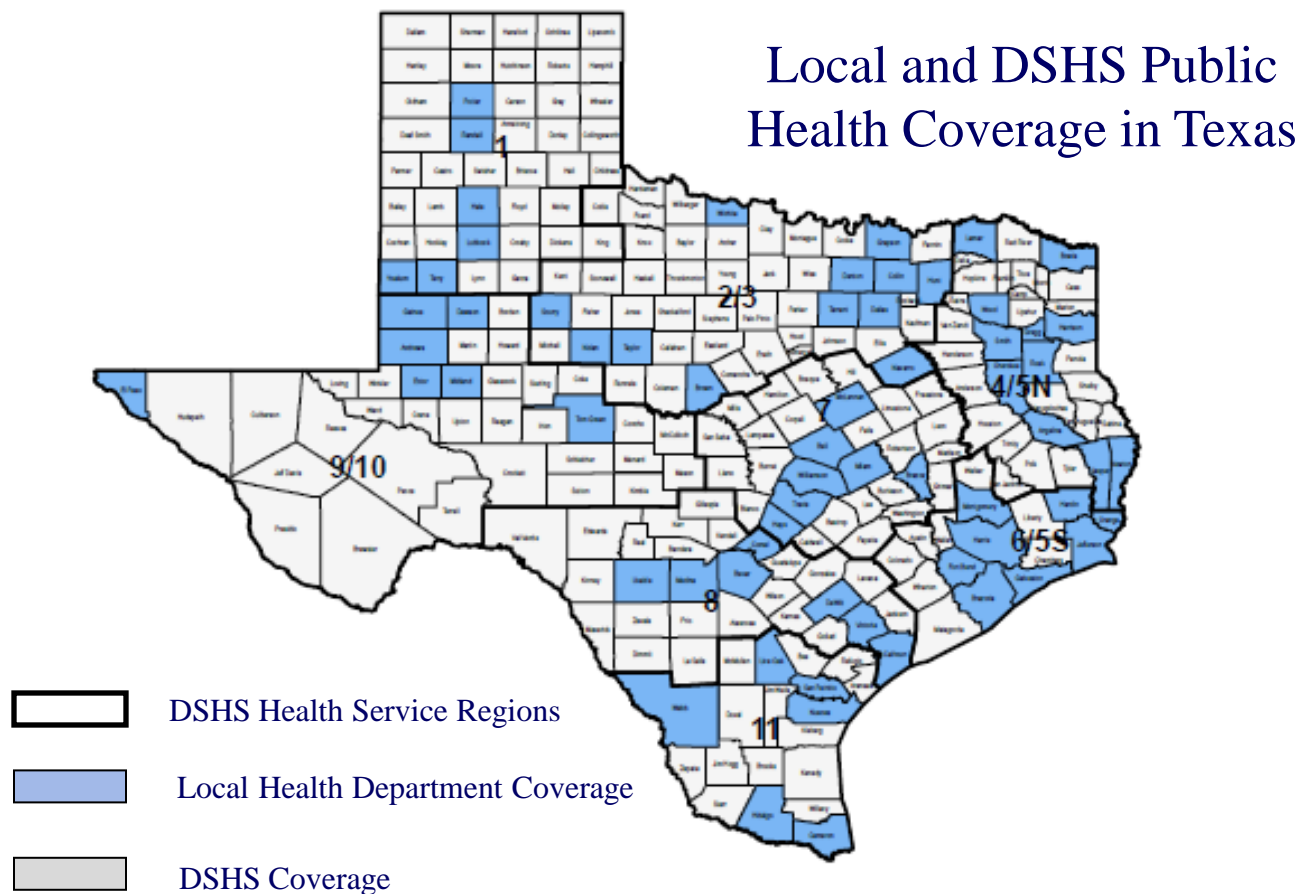
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- Texas is divided into 8 health service regions (HSRs)
 - Where a local health department exists, DSHS HSR offices provide support and supplemental public health services
 - Where there is no local health department (LHD), DSHS may provide core public health services
 - Where there is no local health authority (LHA), the regional medical director acts as the LHA
- LHDs vary in size, resources, and capacity
 - Approximately 60 health departments are “full service” and 80 health departments offer fewer services
 - The DSHS role is to provide, as needed, core public health services not offered at the local level

Public Health in Texas

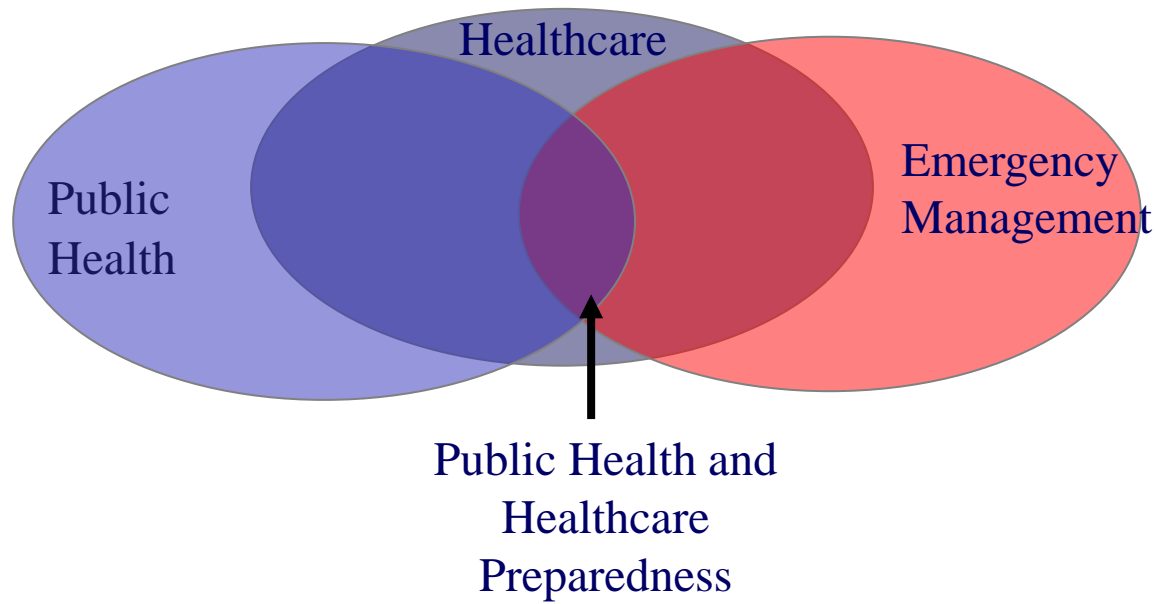


Types of Emergency Responses

- Texas takes an all-hazards approach to preparedness and response, which includes:
 - Disease outbreaks
 - Natural events
 - Biological events
 - Hazardous material spills
 - Radiological accidents
 - Terrorist acts
 - Man-made disasters
- Texas Department of Emergency Management (TDEM) is the lead agency for state disaster response in Texas:
 - State of Texas Emergency Management Plan
 - State Operations Center (SOC)

Public Health and Healthcare Preparedness

- DSHS responsibility falls under the State of Texas Emergency Response Plan
 - Emergency Support Function 8: coordinating public health and medical response during emergencies



DSHS Roles in Emergency Response

- Health Emergency Preparedness and Response
 - Administration of preparedness grants
 - Operation of the State Medical Operation Center (SMOC)
 - Development of statewide plans and policies
 - Education
- Infectious Disease
 - Assistance with triage to determine the severity of the threat
 - Support related to identifying and tracing contacts, administering prophylaxis, and monitoring for additional illness
 - Guidance for disease assessment and monitoring
- DSHS Laboratories
 - Testing for biological, chemical, radiological threats and incidents, and other emerging public health threats

DSHS Roles in Emergency Response

- Health Service Regions
 - Field staff for public health and sanitation
 - Regional Health and Medical Operation Centers as well as staffing Disaster Districts
 - Coordination with partners
 - Response teams
- Disaster Behavioral Health
 - Disaster behavioral health services for survivors, first responders, and disaster workers
- Regulatory Services
 - EMS coordination
 - Radiological response

Texas Emergency Response Partners

- TDEM
- LHDs
- Regional Advisory Councils (RACs)
- Hospitals
- Emergency Medical Services (EMS)
- Emergency support services contractors
- Texas Military Forces
- Laboratory Response Network
- Health and Human Services System Agencies
- Other State Agencies

Public Health Emergency Response in Texas

- Because Texas is a home rule state, emergency response begins at the local level unless there is no LHD.
- When a response exceeds local capacity, the state can provide support, resources, and expertise as requested.
- The state can request federal assistance:
 - CDC
 - Office of the Assistant Secretary for Preparedness and Response (ASPR)
 - Federal Emergency Management Agency (FEMA)

Emergency Public Health Response: Before the Disaster

- Infectious disease surveillance and response
 - Continual and systematic collection, analysis, and interpretation of health data
 - Mandatory reporting for nearly 90 conditions, including foodborne, vector-borne, respiratory, and sexually transmitted diseases
- At any given time, numerous investigations are open under DSHS or local jurisdiction
 - Investigations involve illnesses related to foodborne transmission, sexually transmitted disease, bloodborne pathogens, zoonotic (animal-to-human) disease, or airborne contagions
- Investigations vary widely in scale and interest

Select Current Disease Investigations

- San Antonio Tuberculosis- high school
 - 50 contacts; 3 latent TB cases identified
- Collin County Tuberculosis – high school
 - 56 contacts; 7 latent TB cases and one active TB infection identified
- El Paso Tuberculosis – adult day care center
 - 187 contacts; 28 TB suspects identified and subject to further testing
- Williamson County Tuberculosis – multiple health care locations
 - 342 contacts; 7 latent TB infection cases identified
- Collin County Travel-Associated Measles – elementary school
 - 5 contacts without documented immunity

Emergency Public Health Response: Before the Disaster

- Continual fostering of partnerships
 - RACs, hospitals, EMS, emergency management, stakeholder associations, and local health departments
- Maintenance of disaster response plans and procedures
- Caches of supplies and equipment
 - For example, Personal Protective Equipment (PPE)
- Contingency contracts
 - Medical and clinical staffing, Texas Funeral Directors Association, pharmacy, medical sheltering
- Training and exercises
 - Operation Lone Star
 - East Texas Medical and Dental Outreach

Emergency Public Health Response: During a Disaster Response

- Coordination and control
- Medical evacuation and sheltering
- Responder safety and health
- Medical material management and distribution
- Disaster Behavioral Health
- Epidemiology, surveillance, and laboratory testing
- Communication/emergency public information
- Pharmaceutical distribution

2008 – 2015 DSHS Emergency Responses

- Dallas Ebola Cases
- West Explosion
- West Nile Virus Outbreak
- Bastrop Wildfires
- Hurricane Alex
- Hurricane Dolly
- Hurricane Gustav
- Hurricane Ike
- Tropical Storm Edouard
- H1N1 Pandemic Response
- San Angelo: Yearning for Zion Ranch



Emergency Public Health Response: After the Disaster

- Recovery efforts
 - Assessment of public health and medical infrastructure
 - Provide necessary resources including staff, supplies, and equipment to speed recovery
 - Community assessment for public health emergency response
- After Action Review process
- Revise and review plans and procedures
- Training and exercises

Current Activities: Zika Virus

- Zika virus is an arbovirus that is primarily transmitted mosquito-human-mosquito.
 - Symptoms are typically mild in adults
 - Concerns about link to microcephaly
- Texas' first localized case of Zika virus occurred in the Dallas area
 - Source of transmission is under investigation
 - Sexual transmission a likely cause
- There is no evidence that Zika virus has infected Texas mosquitoes
 - Risk of introduction of Zika into the native mosquito population
- Status
 - Active coordination with CDC and local health departments
 - Education on personal prevention measures and vector control
 - Analysis of microcephaly incidence in Texas
 - DSHS laboratory capability for initial testing

Current Activities: Avian Flu Monitoring

- Avian flu was confirmed in poultry flocks outside Texas over the last year
 - CDC and U.S. Department of Agriculture assured proper disposal of affected flocks
 - Depopulation workers are demobilizing to their home states, including Texas
- Workers are being monitored for 10 days after last possible exposure
 - No human infections with these viruses have been reported
 - The health risk posed to the general public by domestic avian flu is low
 - Monitoring is precautionary to ensure any risk to public health is minimized
- Individuals requiring monitoring have returned to Texas
 - DSHS is providing LHDs with guidance for appropriate monitoring and technical assistance
 - Laboratory testing will occur if symptoms appear, according to set criteria
 - Appropriate precautions are in place if a monitored individual tests positive for Avian Flu

Pressures on the Public Health Preparedness and Response System

- Multiple governmental entities with interdependencies
- Role of the individual in preparedness and prevention
- Dependence on federal funding to support critical activities
- Variance of federal funding streams over time
- Reduced earnings from the Tobacco Settlement funds

Emergency Preparedness and Disaster Response: Challenges

- Information sharing with first responders
- Communications to providers and to the public about infectious disease patterns and actions
- Communications among public health for disease reporting and monitoring
- Surveillance for emerging disease
- Infectious disease response protocols and plans
- Logistical issues in statute
 - Control orders due process and procedures
 - Public health measures
 - Disposition of remains
 - Common carriers